CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.
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50		/				
TOTAL IND.	⇩		⇩		⇩	
TOTAL DEP.	⇦		⇦		⇦	
TOTAL CLAIMS						

	☆ IND.	☆ DEP.	☆ IND.	☆ DEP.	☆ IND.	☆ DEP.
51		/		/		/
52		/		/	/	
53		/		/		/
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TOTAL IND.	⇩		⇩		20	⇩
TOTAL DEP.	⇦		⇦		159	⇦
TOTAL CLAIMS					179	

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMDENDMENTS

Claim		Date
Final	Original	

Left column (handwritten):

Final	Original	Date
		11/21/02
157	51	
152	52	
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Middle column:

Claim		Date
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Right column:

Claim		Date
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If more than 150 cle___ ___ 10 actions
staple additional sheet here